

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90716 010 ***150.00

DOCUMENT # J13302			
1. Entity Name QUEST PRODUCTS INTERNATIONAL, INC.			
Principal Place of Business 48210 TARPON CT. D CAPE CORAL, FL 33904		Mailing Address 48210 TARPON CT. D CAPE CORAL, FL 33904	
2. Principal Place of Business 4110 ENTERPRISE AVENUE		3. Mailing Address 4110 ENTERPRISE AVENUE	
Suite, Apt. #, etc. STE 205		Suite, Apt. #, etc. STE 205	
City & State NAPLES, FL		City & State NAPLES, FL	
Zip 34104	Country USA	Zip 34104	Country USA
4. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		4. FBI Number 65-0028411	
5. Name and Address of Current Registered Agent PITTMAN, LARRY L 6051 ESTERO BLVD. FORT MYERS BEACH, FL 33931		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstated) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, GRANT L MR 1100 EASTHAM WAY, APT 301 NAPLES, FL 34104 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 4110 ENTERPRISE AVENUE, # 205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.			
SIGNATURE: _____		Date: April 27/04 239-352-4111	

94079691

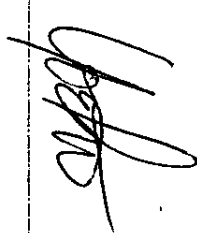


04282004 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

FL Zip Code

Attachment
Doc. # J/3302

QUEST/PRODUCTS INTERNATIONAL, INC. Check Number: 5065		SunTrust SunTrust Bank, Central Florida, N.A. 33-215/631	
4110 ENTERPRISE AVENUE, UNIT 205 NAPLES, FL 34104 239-353-2500		DATE Apr 27, 2004	
Memo:		AMOUNT \$ 150.00	
PAY TO THE ORDER OF: One Hundred Fifty and 00/100 Dollars Florida Department of State Division of Corporations PO BOX 1500 Tallahassee, FL 32302-1500		5065	
⑈005065⑈ ⑆063102152⑆0001113569903⑈			
THIS DOCUMENT CONTAINS A COLORED BACKGROUND ON WHITE PAPER. MICROPRINT IS LOCATED BELOW THIS WARNING BAND.			